PTO/SB/05 (08-03)

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UTILITY PATENT APPLICATION **TRANSMITTAL**

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| Attorne | y Dock | et No. | FL0239USNA | |
| First In | ventor | Yasha | vant Vinayak Vinod Et. Al. | |
| Title F | LUOR | OPOLY | MER YARN BLENDS | U.S. PTC |
| _ | - 44-11 | 1-6-18 | I- FUZ40050050U0 | |

| (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Express Mail Label No. EU710359358US | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 | | | | | | | | |
| 1. See Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS | | | | | | | | |
| 4. Drawing(s) (35 U.S.C. 113) [Total Sheets] 5. Oath or Declaration [Total Sheets] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 | 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: | | | | | | | | |
| specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | | | | | |
| 19. CORRESPONDENCE ADDRESS | | | | | | | | | |
| Customer Number: 23906 | OR Correspondence address below | | | | | | | | |
| Name | | | | | | | | | |
| Address | | | | | | | | | |
| City | State Zip Code | | | | | | | | |
| Country Te | elephone Fax | | | | | | | | |
| Name (Print/Type) Edwin Tocker | Registration No. (Attorney/Agent) 20,341 | | | | | | | | |
| Signature Ellism Intel | Date 1/22/04 | | | | | | | | |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date

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Application Number

FEE TRANSMITTAL

Signature

| f FV 0004 | | | | | | Filing Date | | | | Herewith | | | | | |
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| for FY 2004 | | | | | | ŀ | | | | | | | | | |
| Effective 10/01/2003. Patent fees are subject to annual revision. | | | | | | | First Named Inventor | | | | Yashavant Vinayak Vinod Et. Al. | | | | \dashv |
| Applicant claims small entity status. See 37 CFR 1.27 | | | | | | | Examiner Name | | | Unknown | | | | 4 | |
| | | | | | | Art Unit | | - | Unknown | | | | _ | | |
| TOTAL AMOUNT OF PAYMENT (\$) 770.00 | | | | | | | Attorney Docket No. FL0239 US NA | | | | _ | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | FEE CALCULATION (continued) | | | | | | | | | |
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| Charge any additional fee(s) or any underpayment of fee(s) | | | | | | 1804 | 920* | 1804 | | Requesting Examiner a | | lication of SIR prior t | to i | | ↓ |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | | | | 1805 | 1,840* | 1805 1 | 1,840* | Requesting Examiner | | lication of SIR after | | | ╝ |
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| Claims -3 - | | | | | 1807 | 50 | 1807 | | | | | (-) | | ┨┠ | |
| Large Entity Small Entity | | | | | | 1806 | 180 | 1806 | | | - | under 37 CFR 1.17 | ` ' ' | | ┪┃ |
| Fee Fee | Fee | Fee | Fee Descrip | <u>tion</u> | ĺ | | | | | D | | patent assignment | | | 11 |
| Code (\$) 1202 18 | Code 2202 | | Claims in exces | ss of 20 | | 8021 | 40 | 8021 | 40 | property (t | imes | number of propertie | s) | | ┧╏ |
| 1201 86 | 2201 | | Independent cla | | cess of 3 | 1809 | 770 | 2809 | 385 | Filing a su (37 CFR 1 | | sion after final reject (a)) | ion | | |
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| SUBTOTAL (2) (\$) 0.00 | | | | | | | Other fee (specify) | | | | | | ┥┃ | | |
| **or number previously paid, if greater; For Reissues, see above | | | | | | | iced by | Basic F | шлд Не | ee Pald | S | SUBTOTAL (3) | (\$) | 0.00 | Ш |
| SUBMITTED BY | | | | | | | | | | | (Complete (if applica | able)) | | | |
| Name (Print/Type) Sedwin Tocker | | | | | F | Registra | tion No. | | 20,341 | | Telephone (| 302) 99 | 9-3076 | | |

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